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CONFIRMATION NO. 5786

SERIAL NUMBER 10/594,992	FILING OR 371(c) DATE 11/16/2006 RULE	CLASS 424	GROUP ART UNIT 1633	ATTORNEY DOCKET NO. 042881-0227
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APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/IB05/02479 04/01/2005
 which claims benefit of 60/558,139 04/01/2004 ABN
 and claims benefit of 60/576,804 06/04/2004

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

02/28/2008

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY AB	SHEETS DRAWING 3	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

1444

TITLE

Mucinous Glycoprotein (Muc-1) Vaccine

FILING FEE RECEIVED 1730	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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